

ENTRY BLANK				
PLEASE TYPE OR	PRINT	□ Ente	ered previous May	Show
☐ Ms. ☑ Mr. Artist	ICHARI	o Law	RENCE D	<u>UB</u> E
Permanent 437 Address Street	LARCH	1400	DR BEG	RE/
44017	Tel. (216)	234	-0186	
Zip	Area Code			
Temporary Address				
Stree	t		City	
	Tel. (
Zip	Area Code			
Permanent address	is in what co	unty? <u> </u>	YAHOGA	
Born in Cuyahoga (
Collaborator	f Any)			
If entries are not ac Artist will pick	up entries at	Museum.		
Museum should Museum should	•		O.D. at this addres	ss:
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The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature The act Inventor

ENTRY BLA	NKS						
☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts							
Medium or Materia	ls						
TH	OTO	OGRAPHY					
Title MUS	HR	ooms					
Price or NFS	Insurance Value If NFS Only		Size 41 (8 × 14 "				
GRAPHICS AND PHOTOGRAPHY ONLY							
Additional No. For	Sale	Sale Total No. in Edition		Price of Frame			
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Price or NFS 100,00 Additional No. For	Insura If NFS GRAF r Sale	nce Value S Only	Siz	Y ONLY	f Frame		
Price or NFS 100,00 Additional No. For	Insura If NFS GRAF r Sale	nce Value S Only PHICS AND PHOTOGR. Total No. in Edition	Siz	Y ONLY Price o	f Frame		
Price or NFS 100,00 Additional No. For	GRAF r Sale	nce Value S Only PHICS AND PHOTOGR. Total No. in Edition	Sizz	Y ONLY Price o	f Frame		

1974 MAY SHOW

The Cleveland Museum of Art Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	RICHARD LAWRENCE DUBÉ
Address	437 LARCHWOOD DRIVE
City & State	BEREA, CHIO Zip 44017

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.
DOTNOT DETACH ()
☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts
Medium or Materials PHOTOGRAPHY
Title MUSHROOMS
DO NOT WRITE IN THIS SECTION ACCEPTED REJECTED
DO NOT DETACH
2 □ 1. Paintings □ 2. Graphics ☑ 3. Photography □ 4. Sculpture □ 5. Electric □ 6. Crafts
Medium or Materials PHOTOGRAPY
Title HEM LOCK
DO NOT WRITE IN THIS SECTION ACCEPTED REJECTED